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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page _____ of _____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Wayne W.		Frenier	
Inventor's Signature	<i>Wayne W. Frenier</i>		
Residence: City	Katy	State	Texas
Country	U.S.A.		
Citizenship	U.S.A.		
Mailing Address	19111 Cotton Gin Drive		
Mailing Address			
City	Katy	State	Texas
Zip	77449		
Country	U.S.A.		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature	<i>John C. Frenier</i>		
Date			
Residence: City	<i>19111 Cotton Gin Drive</i>	State	
Country			
Citizenship			
Mailing Address			
Mailing Address			
City	<i>19111 Cotton Gin Drive</i>	State	
Zip			
Country			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature	<i>John C. Frenier</i>		
Date			
Residence: City	<i>19111 Cotton Gin Drive</i>	State	
Country			
Citizenship			
Mailing Address			
Mailing Address			
City	<i>19111 Cotton Gin Drive</i>	State	
Zip			
Country			

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Please type a plus sign (+) inside this box → **[+]**

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	John W. Still
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	56.0708

I hereby appoint:

Practitioners at Customer Number

27452

Place Customer
Number Bar Code
Label here

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

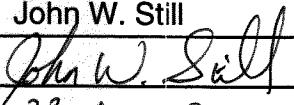
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	John W. Still
Signature	
Date	22-Oct-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Total of _____ forms are submitted.

Please type a plus sign (+) inside this box →

PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	<i>56-0708</i>
Filing Date	
First Named Inventor	John W. Still
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	56.0708

I hereby appoint:

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OR

Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Keith Dismuke

Signature *Keith Dismuke*

Date 22 - October - 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Total of _____ forms are submitted.

Please type a plus sign (+) inside this box →

PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	John W. Still
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	56.0708

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Name	Registration Number

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OR

Firm or
Individual Name

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Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Wayne W. Frenier

Signature

Wayne W. Frenier

Date

10/27/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Total of _____ forms are submitted.

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	56.0708
First Named Inventor	John W. Still
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Generating Acid Downhole in Acid Fracturing

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION Utility or Design Patent Application

Direct all correspondence to: Customer Number: **27452** OR Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

John W.

Family Name

or Surname Still

Inventor's Signature

Date

22-Oct-03

Residence: City

Richmond

State

Texas

Country

U.S.A.

Citizenship

U.S.A.

Mailing Address

2547 Lake Dale Lane

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Richmond

State

Texas

ZIP

77469

Country

U.S.A.

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Keith

Family Name

or Surname Dismuke

Inventor's Signature

Date

Residence: City

Katy

State

Texas

Country

U.S.A.

Citizenship

U.S.A. Oct 22, 2003

Mailing Address

2230 Long Cove Circle

City

Katy

State

Texas

ZIP

77450

Country

U.S.A.



Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.